POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Mt		04/0
O.I.P.E. CLASSIFIER		19	5/2
FORMALITY REVIEW	Ps		
RESPONSE FORMALITY REVIEW	Rs	JC 823	06·07·01

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date			Claim		Date			Claim		Date	
Final	Original				Final	Original				Final	Original		
	1					51					101		
	2					52					102		
	3					53					103		
	4					54					104		
	5					55					105		
	6					56					106		
	7					57					107		
	8					58					108		
	9					59					109		
	10					60					110		
	11					61					111		
	12					62					112		
	13					63					113		
	14					64					114		
	15					65					115		
	16					66					116		
	17					67					117		
	18					68					118		
	19					69					119		
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	38					88					138		
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	41					91					141		
	42					92					142		
	43					93					143		
	44					94					144		
	45					95					145		
	46					96					146		
	47					97					147		
	48					98					148		
	49					99					149		
	50					100					150		

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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